

AO 433 (Rev. 10/23)					ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS		FOR COURT USE ONLY	
TRANSCRIPT ORDER							DUE DATE:	
<div style="display: flex; justify-content: space-between;"> <div> <p><i>Please Read Instructions:</i></p> <p>1. NAME Melissa R. Smith</p> <p>4. DELIVERY ADDRESS OR EMAIL 303 South Washington Avenue</p> <p>8. CASE NUMBER 2:23-cv-00202-JRG-RSP</p> <p>12. CASE NAME XR Communications LLC d/b/a Vivato Technologies v. AT&T</p> <p>15. ORDER FOR <input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> BANKRUPTCY <input type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL <input type="checkbox"/> IN FORMA PAUPERIS <input type="checkbox"/> OTHER </p> </div> <div> <p>2. PHONE NUMBER (903) 934-8450</p> <p>5. CITY Marshall</p> <p>9. JUDGE Roy S. Payne</p> <p>10. FROM 2/3/2025</p> <p>11. TO 2/3/2025</p> <p>13. CITY Marshall</p> <p>14. STATE TX</p> </div> <div> <p>3. DATE 2/11/2025</p> <p>6. STATE Texas</p> <p>7. ZIP CODE 75670</p> </div> </div>								
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)								
PORTIONS		DATE(S)		PORTION(S)		DATE(S)		
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify Witness)				
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)								
<input type="checkbox"/> OPENING STATEMENT (Defendant)								
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)				
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)								
<input type="checkbox"/> OPINION OF COURT								
<input type="checkbox"/> JURY INSTRUCTIONS				<input checked="" type="checkbox"/> OTHER (Specify)				
<input type="checkbox"/> SENTENCING				Motion Hearing		2/3/2025		
<input type="checkbox"/> BAIL HEARING								
17. ORDER								
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE		COSTS		
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3-Day	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES 1					
Next-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES					
2-Hour	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES					
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>						
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL		0.00		
18. SIGNATURE /s/ Melissa R. Smith				PROCESSED BY				
19. DATE 2/11/2025				PHONE NUMBER				
TRANSCRIPT TO BE PREPARED BY				COURT ADDRESS				
ORDER RECEIVED		DATE	BY					
DEPOSIT PAID				DEPOSIT PAID				
TRANSCRIPT ORDERED				TOTAL CHARGES		0.00		
TRANSCRIPT RECEIVED				LESS DEPOSIT		0.00		
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL REFUNDED				
PARTY RECEIVED TRANSCRIPT				TOTAL DUE		0.00		

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